HVAC SERVICE & INSTALLATION

123 Comfort Lane
City, State, ZIP
Phone: (555) 000-0000

INVOICE

Invoice #: _____
Date: _____

CUSTOMER INFO

Name: _____
Address: _____
Phone: _____

EQUIPMENT INFO

Brand/Model: _____
Serial #: _____
Location: _____

SERVICE DESCRIPTION / SCOPE OF WORK

Description of Parts & Materials	Qty	Unit Price	Total
Labor Hours / Service Call Fee:			

Subtotal:$_____
Tax:$_____

TOTAL DUE:$_____

Customer Signature: _____ Date: _____

Terms: Payment is due upon completion of service. Thank you for your business!